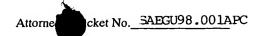
U





DECLARATION AND POWER OF ATTORNEY - UŞA PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is

sought on the invention	entitledARTIFICIAL DURA MATER /	
		
the specification of whi	ch:	
(a)	is attached hereto; or	
(b)	was filed on	as Application
	No or Express Mail No.,	as Application No. not
	yet known	and was amended
	on	(if applicable); or
(c) X	was described and claimed in PCT International Application No.	
	PCT/JP01/03688 / filed on April	27, 2001
	and as amended under PCT Article 19 on	
	(if any) and/or under PCT Article 34 on	(if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above;

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56;

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent, design or inventor's certificate or any PCT international application(s) listed below and have also identified below any foreign application(s) for patent, design or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed for the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 U.S.C. § 119	
2000-130676	28/04/2000 /	x YES	NO
		YES	NO
		YES	NO
1		YES	NO
	NUMBER	NUMBER (day, month, year)	NUMBER (day, month, year) UNDER 37 2000-130676 28/04/2000 X YES YES YES

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below, and insofar as the subject matter of each of the claims of this application is not disclosed in the prior

Attorne cket No.

United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

	Prior U.S.A. Application(s)
	Application No.: Filing Date: Status:
	POWER OF ATTORNEY: I hereby appoint the registrants of Knobbe, Martens, Olson & Bear, LLP, 620 Newport Center Drive, Sixteenth Floor, Newport Beach, California 92660, Telephone (949) 760-0404, Customer No. 20,995
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful, false statements may jeopardize the validity of the application or any patent issued thereon.
1-00	Full name of sole or first inventor: YAMAUCHI Koji
	Inventor's signature Koriji: Yamauchi: Day 27th Month December Year 2001
	Residence (city and country): Ayabe-shi, Kyoto 623-0011, Japan
10	
	Citizenship: Japan c/o Medical Material Center of GUNZE LIMITED, 46, Natsumegaichi, Post Office Address: Aono-cho, Ayabe-shi, Kyoto 623-0011, Japan
25	Full name of second inventor: <u>ASAHARA Tomohiko</u>
	Full name of second inventor:ASAHARA Tomohiko Inventor's signature
	Residence (city and country): Koto-ku, Tokyo 135-0016, Japan
U	Citizenship: Japan
•	Citizenship: Japan C/O JOHNSON & JOHNSON K.K. MEDICAL COMPANY, Post Office Address: 3-2, Toyo 6-chome, Koto-ku, Tokyo 135-0016, Japan
	1 Ost Office Address
	Full name of third inventor:
	Inventor's signature Day Month Year
	Residence (city and country):
	Citizenship:
	Post Office Address:
	Send Correspondence To: KNOBBE, MARTENS, OLSON & BEAR, LLP Customer No. 20,995 PE. 33